

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M67467

Entity Name: COVANTA PASCO, INC.**Current Principal Place of Business:**445 SOUTH STREET
MORRISTOWN, NJ 07960**Current Mailing Address:**C/O COVANTA HOLDING CORP.
445 SOUTH STREET
MORRISTOWN, NJ 07960 US**FEI Number:** 13-3447536**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title CFO
Name HELGESON, BRADFORD
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960Title PD
Name JONES, STEPHEN J
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960Title VS
Name SIMPSON, TIMOTHY
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960Title TREASURER
Name JAMES, REILLY
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960Title VP
Name TADDEO, PAOLA
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAOLA TADDEO

VP, TAX

03/12/2021

Electronic Signature of Signing Officer/Director Detail_____
Date